

## Chris O'Brien

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**From:** Lawrence, Sarah <slawrence@ric.edu>  
**Sent:** Wednesday, April 14, 2021 12:16 PM  
**To:** House Finance Committee  
**Subject:** Bill 6122, Article 12, CHW Medicaid Coverage - PLEASE RETAIN

Dear members of the House Finance Committee:

My name is Sarah R. Lawrence, I live in Portsmouth, and I am Director of the Community Health Worker Association of Rhode Island. I strongly urge you to retain the language found in House Bill 6122, Article 12, Section 8, Page 19, (e), that authorizes inclusion of Medicaid coverage for services provided by Community Health Workers.

Community Health Workers are the first frontline emergency responders, even before medical techs or social service providers, to come to the aid of people who need it most. CHWs often live in the communities of people they serve, and they know their challenges well. It is a CHW who might discover whose diabetes is getting out of control by noticing that person not leaving their apartment in weeks; they knock on the door and they help that person refill medications or transport them in fragile condition to the doctor. They work with the client to build their own capacity for preventing this from occurring again. A CHW might hear from a neighbor that a family down the block is about to get evicted and they go help that family find legal recourse. This family potentially avoids violence and trauma, not to mention worsening health conditions, because the CHW "catches" them in time. Then, they work with this family to empower themselves and avail themselves of community opportunities to prevent this from occurring again. All of this assistance is delivered with respect, without judgement, and with the most up to date resources available in the community because the CHW is expert in navigation social, cultural and clinical resources.

Investing in covering CHW services is highly likely to earn a return on investment regarding healthcare and social services costs. For example, a study in Arkansas found that a program involving CHWs "produced a total estimated savings of \$3.515 million in Medicaid expenditures for 919 program participants during the three-year demonstration period" (1). More important, an investment in CHWs will help strengthen communities' own talents and leadership over time and gird resilience to face many social and public health challenges: pandemics, discrimination, climate dislocation, and economic instability, to name a few.

I keep thinking about how Cheryl, a CHW in downtown Providence, got to know a streetworker who had a substance use disorder. After building their acquaintanceship over a period of two years and the CHW's continual offers of help and kindness, the woman one day finally told the CHW she was ready to deal with her substance use. Cheryl helped her get to a rehab facility and build her support network, and now that woman works for a local non-profit. CHWs help people find resources every day, and they also spend the time to help people change their entire life.

Thank you for reading. Please retain Medicaid for CHW services as a highly valuable and targeted way to reach those in high need with exactly the correct local resources that can be of the most help.

Sincerely,  
Sarah Lawrence  
Director,  
Community Health Worker Association of RI

1. Holly C. Felix, Glen P. Mays, M. Kathryn Stewart, Naomi Cottoms and Mary Olson Medicaid Savings Resulted When Community Health Workers Matched Those With Needs To Home And Community Care, *Health Affairs*, 30, no.7 (2011):1366-1374

Sarah R. Lawrence, CCHW, MSW, PhD  
*Director, Community Health Worker Association of Rhode Island*  
Institute for Education in Healthcare, Rhode Island College  
[www.chwari.org](http://www.chwari.org)  
slawrence@ric.edu